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(Depositor's name)		
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/939,716	08/28/2001	Kazushige Yonenaga	011070	2708

TITLE OF INVENTION: OPTICAL TRANSMISSION SYSTEM

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DÜE	DATE DUE
nonprovisional	NO	\$1510	\$300 \$0		\$1810	04/15/2009
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Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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PLEASE NOTE: Un	nless an assignee is ident	ified below, no assignee oletion of this form is NO	data will appear on the part of the part o	atent. If an assignee is ic	dentified below, the docu	iment has been filed

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Typed or printed name

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

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Darren Crew

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be	e printed on the patent) : 🔲 Individual 🚨 Corporation or other private group entity 🖵 Governmen					
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5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).					
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Authorized Signature Same Crem	Date April 8, 2009					

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37,806

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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
09/939,716	08/28/2001		Kazushige Yonena	ga	011	070	2708	-
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nonprovisional	. NO	\$1510	\$300	\$0		\$1810	04/15/2009	
EXAM	INER	ART UNIT	CLASS-SUBCLASS					
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CFR 1.363).  Change of corresp	ondence address (or Cha	nge of Correspondence		the names of up to 3 registered patent attorneys agents OR, alternatively.				_
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
			2 registered attorney 2 registered patent listed, no name wil	attorneys or agents. If	nes of up to no name is	3		_
. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or	type)				_
PLEASE NOTE: Uni	less an assignee is ident h in 37 CFR 3.11. Comp	fied below, no assignee pletion of this form is NO	data will appear on th	e patent. If an assign	nee is identifie	d below, the doc	nument has been filed	for
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IIPPON TELEGRA	APH AND TELEPH	ONE CORPORATIO	202	, JAPAN	·			
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a. The following fee(s):	are submitted:	46	o. Payment of Fee(s): (I		ny previously	paid issue fee sh	own above)	
Publication Fee (N	lo small entity discount p	ermitted)	Payment by credit	card. Form PTO-2038	is attached.			
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	s SMALL ENTITY statu		b. Applicant is no	longer claiming SMA	LL ENTITY st	atus. See 37 CFR	1.27(g)(2).	
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Typed or printed name	Darren Cre	<i>i</i>	· .	Registration N	37,8	106	· ——————	
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